

**Office of Community Development**  
**Grant Agreement Request Form**  
(Attachment A must be submitted with this form)

|                         |                                     |
|-------------------------|-------------------------------------|
| Grant #                 | S-Y-14-7GJ-1                        |
| Grantee                 | Coleman Professional Services, Inc. |
| FTI Number              |                                     |
| CEO Name                | Nelson Burns                        |
| CEO Title               | President and CEO                   |
| Address                 | 5982 Rhodes Road                    |
| City, State, Zip        | Kent, Ohio 44240                    |
| Grant Amount            | \$161,000                           |
| Grant Start Date        | 1/1/2015                            |
| Project Completion Date | 12/31/2016                          |
| Final Draw Request Date | 1/31/2017                           |
| Grant End Date          | 2/28/2017                           |

**Project Specific Conditions**

Lead Based Paint? No

Other Project Specific Conditions

1)

2)

OCD Representative     Kimberly Alexander

  
Signature of OCD Representative

1-13-15  
Date

(SIGNATURE CONFIRMS GRANT AGREEMENT IS OK TO BE EXECUTED)

1<sup>st</sup> Review:

 1.13.15

2<sup>nd</sup> Review:

 1.16.15

## ATTACHMENT A

### SCOPE OF WORK AND BUDGET

#### I. GENERAL DATA

|                      |                                       |                      |   |
|----------------------|---------------------------------------|----------------------|---|
| Grantee :            | COLEMAN PROFESSIONAL SERVICES, INC.   |                      |   |
| Vendor ID.Nbr :      | 53123                                 | Grant Number :       | S-Y-14-7GJ-1                              |
| County :             | Portage                               | Total Grant Award :  | \$ 161,000                                |
| Applicant CEO Cont : | Nelson Burns                          | OCD Rep :            | Kimberly Alexander                        |
| Title :              | President & Ceo                       | Applicant Preparer : | Carol McCullough                          |
| Address :            | 5982 Rhodes Rd,                       | Phone Number :       | (330) 676-6810                            |
|                      | Kent, OH 44240                        | Email Address :      | carol.mccullough@coleman-professional.com |
| Phone Number :       | (330) 676-6801                        |                      |   |
| Email Address :      | nelson.burns@coleman-professional.com |                      |   |
| Ohio House :         | 68 - Margaret Ann Ruhl                | Ohio Senate :        | 28 - Tom Sawyer                           |

#### II. PROJECT DESCRIPTION

##### Permanent Supportive Housing Program

Coleman Professional Services, Inc. will provide 55 units of permanent supportive housing for homeless, disabled single males and females and households with children who are at or below 35% of Area Median Income in Portage County. Grant funds will be used to support housing operations. The Program will serve 65 households consisting of 77 persons. Coleman Professional Services will also provide eight units of permanent supportive housing to homeless, disabled single males who are at or below 35% of AMI in Trumbull County. Grant funds will be used to support housing operations. The program will serve 12 households/individuals. It is projected that 100% of persons will exit to a permanent destination.

ATTACHMENT A  
SCOPE OF WORK AND BUDGET

III. SOURCES OF FUND

| Provider                      | Amount            | Fund Category         | Fund Type | Term | Interest Rate |
|-------------------------------|-------------------|-----------------------|-----------|------|---------------|
| Coleman Professional Services | \$ 35,863         | Other Funds           | Cash      | N/A  | N/A           |
| OhioMHAS                      | \$ 44,637         | State and Local Funds | Grant     | N/A  | N/A           |
| Grant Funds                   | \$ 161,000        |                       |           |      |               |
| <b>Total</b>                  | <b>\$ 241,500</b> |                       |           |      |               |

IV. AWARDED PROGRAM BUDGET

Permanent Supportive Housing Program

| Project Name                  | Activity                    | OHTF Funds        | Other Funds Amount | - Source   | Total Cost        |
|-------------------------------|-----------------------------|-------------------|--------------------|------------|-------------------|
| 1-Coleman Portage County PSH  | 1-Operating Expenses / CHDO | \$ 52,500         | \$ 26,250          | Multiple.. | \$ 78,750         |
| 2-Coleman Trumbull County PSH | 1-Operating Expenses / CHDO | \$ 108,500        | \$ 54,250          | Multiple.. | \$ 162,750        |
| <b>Total Awarded Budget</b>   |                             | <b>\$ 161,000</b> | <b>\$ 80,500</b>   |            | <b>\$ 241,500</b> |

ATTACHMENT A  
SCOPE OF WORK AND BUDGET

V. PROGRAM OUTCOMES

| Project Name                  | Persons<br>Benefited | No. of<br>Households<br>Served | Counties Served |
|-------------------------------|----------------------|--------------------------------|-----------------|
| 1-Coleman Portage County PSH  | 77                   | 65                             | Portage         |
| 2-Coleman Trumbull County PSH | 12                   | 12                             | Trumbull        |
| <b>Total</b>                  | <b>89</b>            | <b>77</b>                      |                 |